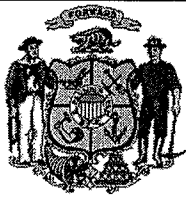


**PUBLIC**Public Service Commission of Wisconsin  
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**Public Service Commission of Wisconsin  
(8155) - MILWAUKEE SMSA LTD PARTNERSHIP  
Commercial Mobile Radio Service Provider Annual Report  
For Year Ending December 31, 2006**[Rules for Reporting](#)  
[Assessable Revenue Definitions](#)  
[Help](#)

\* - indicates required fields

**Signature**

I certify that I am the person responsible for accounts; that I have examined the following report and, to the best of my knowledge, information and belief, it is a correct statement of the business and affairs of said utility for the period covered by the report in respect to each and every matter set forth therein.

Utility Name: MILWAUKEE SMSA LTD PARTNERSHIP

Person responsible for accounts: Pete Ritcher \*

Title of person responsible for accounts: Chief Financial Officer \*

Date: 04/02/2007 \* (mm/dd/yyyy)

**Identification**

Utility Name: MILWAUKEE SMSA LTD PARTNERSHIP

Street Address: 5565 Glenridge Connector, Suite 1700 \*

PO Box: PO Box Zip: \*

City: Atlanta \* State: GA \* Zip: 30342 \*

Web Site Address: www.cingular.com

Business Customers Phone: 8003310500 Example 6085551212 Ext: \*

Residential Customers Phone: 8003310500 Example 6085551212 Ext: \*

**Primary Address - Primary Utility Contact (located at utility address)**

Name: Tom Jankowski \*

Title: Senior Manager, State Government Affairs \*

Firm/Company: Cingular Wireless \*

Office Address: 5565 Glenridge Connector, Suite 1700 \*

PO Box: PO Box Zip: \*

City: Atlanta \* State: GA \* Zip: 30342 \*

Fax Number: 8662470554 Example 6085551212

Phone Number: 4042366711 \* Example 6085551212

Email Address: tom.jankowski@cingular.com \*

**Annual Report Contact - Contact Person for Information Contained in This Annual Report**☐ Same As Primary Address

Name: Tom Jankowski \*

Title: Senior Manager, State Government Affairs \*

Firm/Company: Cingular Wireless \*

Office Address: 5565 Glenridge Connector, Suite 1700 \*

PO Box:

**PUBLIC**

PO Box Zip:						
City:	Atlanta	* State:	GA	* Zip:	30342	*
Fax Number:	8662470554	Example	6085551212			
Phone Number:	4042366711	* Example	6085551212			
Email Address:	tom.jankowski@cingular.com					

**Regulatory Contact - Contact Person for Regulatory Inquiries and Complaints**☐ Same As Primary Address

Name:	Office of the President	*				
Title:	Manager, Office of the President	*				
Firm/Company:	Cingular Wireless	*				
Office Address:	1100 Woodfield Rd., Suite 200	*				
PO Box:		PO Box Zip:				
City:	Schaumburg	* State:	IL	* Zip:	60173	*
Fax Number:	8474137446	Example	6085551212			
Phone Number:	8474137676	* Example	6085551212			
Email Address:	james.m.camberis@cingular.com					

**Assessable Revenues**

- 1) Do you currently provide commercial mobile radio service (CMRS) service in Wisconsin? Y (Y/N) \*
- 1a) If not, please state the nature of your entity's business.
- 1b) If not, do you intend to provide CMRS service in Wisconsin at a future date? (Blank/Y/N)
- 2) Do you believe that this year's CMRS revenues have already been reported to the Commission? N (Y/N) \*
- 2a) If yes, provide particulars concerning annual report (utility name and number, report name, page and line number and dollar amount).
- 2b) If no, provide your assessable revenues (in 000's) for Universal Service Fund assessment purposes. (000's)
- Wisconsin Gross Intrastate Operating Telecommunications Service Revenue Redacted

**Annual Report Notes (if applicable)**

**Please print this report before submitting it to the Commission. Once the report is submitted you will not be able to print it.**

When the submit button is clicked, the program will check for errors and display a message to the right of any box with an error. If there are no errors, a confirmation page will appear.

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Print

Check for Errors & Submit